



1FW

PATENT
Attorney Docket No. INL-071

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Conlon *et al.* CONFIRMATION NO.: 8081
SERIAL NO.: 10/733,871 GROUP NO.: 1743
FILING DATE: December 11, 2003 EXAMINER: Not yet assigned
TITLE: Multi-Analyte Reference Solutions

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

CHANGE OF CORRESPONDENCE ADDRESS FOR APPLICATION

Sir:

Please change the Correspondence Address for the above-identified patent application to the address associated with:


Customer Number 022832.

I am the Attorney of record, Registration Number 44,244.

Respectfully submitted,

Date: March 16, 2005
Reg. No.: 44,244

Tel. No.: (617) 261-3167
Fax No.: (617) 261-3175



Ronda P. Moore
Attorney for Applicants
Kirkpatrick & Lockhart Nicholson
Graham LLP
75 State Street
Boston, Massachusetts 02109-1808



PATENT
Attorney Docket No. INL-071

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Conlon *et al.*
SERIAL NO.: 10/733,871 GROUP NO.: 1743
FILING DATE: December 11, 2003 EXAMINER: Not Yet Assigned
TITLE: Multi-Analyte Reference Solutions

CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 16th day of March, 2005.

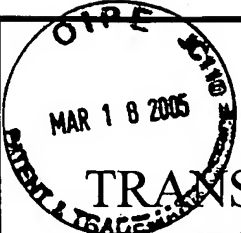

Brenda L. MacLean

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450


Sir:

Submitted herewith are:

1. Transmittal Form (1 page);
2. Change of Correspondence Address For Application (1 page); and
3. a return receipt postcard.

 <h1 style="margin: 0;">TRANSMITTAL FORM</h1>	Application Serial Number	10/733,871
	Filing Date	December 11, 2003
	First Named Inventor	Conlon
	Group Art Unit	1743
	Examiner Name	Not yet assigned
	Attorney Docket No.	INL-071
	Confirmation No.	8081

ENCLOSURES <i>(check all that apply)</i>		
<input type="checkbox"/> Fee Transmittal Form <div style="margin-left: 20px;"> <input type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form </div> <input type="checkbox"/> Amendment/Response (7 pages) <div style="margin-left: 20px;"> <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson </div> including Drawings [Total Sheets ____]	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application <input type="checkbox"/> Formal Drawing(s) <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input type="checkbox"/> Power of Attorney By Assignee of Entire Interest/Revocation of Prior Powers and New Power of Attorney <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program <input type="checkbox"/> Amendment After Allowance <input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief (in triplicate) <input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return Receipt Postcard <input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 (1 page) <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 <input checked="" type="checkbox"/> Additional Enclosure(s) <i>(please identify below)</i> Change of Correspondence Address for Application (1 page)
<input type="checkbox"/> Petition for Extension of Time <input type="checkbox"/> Information Disclosure Statement (2 pages) <div style="margin-left: 20px;"> <input type="checkbox"/> Form PTO-1449 (12 pages) <input type="checkbox"/> Copies of IDS Citations (B108-B118; C263-C427) </div> <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Sequence Listing submission <div style="margin-left: 20px;"> <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above </div>		

CORRESPONDENCE ADDRESS	SIGNATURE BLOCK
Direct all correspondence to: Patent Administrator Kirkpatrick & Lockhart Nicholson Graham LLP 75 State Street Boston, MA 02109-1808 Tel. No.: (617) 261-3100 Fax No.: (617) 261-3175	Respectfully submitted,  Ronda P. Moore Attorney for Applicants Kirkpatrick & Lockhart Nicholson Graham LLP 75 State Street Boston, MA 02109-1808